

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001982

Entity Name: ANDLINGER & COMPANY, INC.

FILED  
Jan 07, 2009  
Secretary of State

## Current Principal Place of Business:

660 BEACHLAND BLVD  
202  
VERO BEACH, FL 32963

## Current Mailing Address:

P.O. BOX 1730  
VERO BEACH, FL 32961

## New Principal Place of Business:

5601 HIGHWAY A1A  
221  
VERO BEACH, FL 32963

## New Mailing Address:

FEI Number: 13-3879510      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MITCHELL, IVAR  
660 BEACHLAND BLVD  
SUITE 202  
VERO BEACH, FL 32963 US

## Name and Address of New Registered Agent:

MITCHELL, IVAR  
5070 HIGHWAY A1A  
SUITE 221  
VERO BEACH, FL 32963 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

01/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: T ( ) Delete  
Name: RUSSELL, JAMES R  
Address: 303 SOUTH BROADWAY  
City-St-Zip: TARRYTOWN, NY 10591

Title: DS ( ) Delete  
Name: MAGIDA, STEPHEN A  
Address: 303 BROADWAY  
City-St-Zip: TARRYTOWN, NY 10591

Title: VAST ( ) Delete  
Name: MITCHELL, IVAR  
Address: 660 BEACHLAND BLVD #202  
City-St-Zip: VERO BEACH, FL 32963

Title: PD ( ) Delete  
Name: ANDLINGER, MERRICK G  
Address: 303 SOUTH BROADWAY  
City-St-Zip: TARRYTOWN, NY 10591

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VAST (X) Change ( ) Addition  
Name: MITCHELL, IVAR  
Address: 5070 HIGHWAY A1A - SUITE 221  
City-St-Zip: VERO BEACH, FL 32963

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IVAR W. MITCHELL

VP

01/07/2009

Electronic Signature of Signing Officer or Director

Date